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Connecting Kids to Coverage

## Description of Dental Benefits for Children in North Dakota

### Children's Dental Services

#### Preventive Services

	Is the service Covered?			Frequency	List any service-specific limitations
	Yes	Only with prior authorization	No		
Cleanings	X			2 x year	
Fluoride treatments (including fluoride varnishes)	X			2 x year	
Sealants (list any tooth-specific limits)	X				
Space maintainers	X				



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### Diagnostic Services

	Is the service Covered?			Frequency	List any service-specific limitations	Recommended age of first visit?
	Yes	Only with prior authorization	No			
<b>Dental examinations</b>						
	X			2 x year		1
<b>X-Rays</b>						
Bitewing	X					
Full Mouth	X					
Panoramic	X			1 x every 3 years		



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### Treatment Services

	Is the service Covered?			Frequency	List any service-specific limitations	Criteria for coverage
	Yes	Only with prior authorization	No			
Fillings						
Silver amalgam	X				Posterior Teeth	
Tooth colored composite	X					
Crowns/tooth caps						
Stainless steel crowns	X				Replacement of lost or defective crowns allowed once every 5 calendar years, when not part of a bridge.	
Metal (only) crowns	X					
Metal/porcelain crowns	X					
Porcelain (only) crowns	X					
Root Canals (endodontics)						
Root canals on baby teeth (pulpotomies)	X					
Root canals on permanent teeth	X					
Gum (periodontal) therapy						
	X					



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	Yes	Only with prior authorization	No			
<b>Dentures</b>						
Partial dentures	X				Replacement allowed once every 5 calendar years.	
Complete dentures	X				Replacement allowed once every 5 calendar years.	
Bridges	X				Replacement allowed once every 5 calendar years.	
<b>Orthodontics*</b>						
Retainers (orthodontic)		X				
Braces		X			Comprehensive orthodontic treatment must meet a 20 point criteria.	
<b>Oral surgery</b>						
Simple extractions	X					
Surgical extractions	X					
Care of abscesses	X					
Cleft palate treatment			X		Covered under the medical policy.	
Cancer treatment			X		Covered under the medical policy.	
Treatment of fractures	X					



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	Yes	Only with prior authorization	No			
Biopsies	X					
<b>Treatment of jaw joint problems (TMJ)</b>						
			X		Covered under the medical policy.	
<b>Emergency room services provided by a dentist</b>						
			X			
<b>Inpatient Hospital Services</b>						
			X			
<b>Anesthesia</b>						
General anesthesia	X					
Intravenous conscious sedation			X			When provided by an anesthesiologist (MD), nurse anesthetist or oral surgeon and not in conjunction with routine dental care.
Non-intravenous conscious sedation			X			



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	Yes	Only with prior authorization	No			
Analgesia (nitrous oxide)	X					

\* When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).